

## SUMMARY OF REGULAR POLICY CHANGES FISCAL YEAR 2006-07

POLICY CHG. NO.	CATEGORY & TITLE	TOTAL FUNDS	FEDERAL FUNDS	STATE FUNDS
<b>ELIGIBILITY</b>				
1	FAMILY PLANNING INITIATIVE	\$446,576,000	\$301,112,500	\$145,463,500
2	BREAST AND CERVICAL CANCER TREATMENT	\$73,147,000	\$40,651,650	\$32,495,350
3	REDETERMINATION FORM SIMPLIFICATION	\$22,607,330	\$11,303,660	\$11,303,660
4	CHDP GATEWAY - PREENROLLMENT	\$17,549,000	\$11,406,850	\$6,142,150
5	BRIDGE TO HFP	\$7,418,000	\$4,821,700	\$2,596,300
6	SHIFT OF CCS STATE/COUNTY COSTS TO MEDI-CAL	\$5,000,000	\$2,500,000	\$2,500,000
7	ELIG. FOR CHILDREN IN MONTH PRIOR TO SSI/SSP GRANT	\$1,595,010	\$797,500	\$797,500
8	MEDI-CAL/HF BRIDGE PERFORMANCE STANDARDS	\$1,002,590	\$651,690	\$350,910
9	MEDI-CAL TO HFP ACCELERATED ENROLLMENT	\$322,220	\$209,440	\$112,780
10	BCCTP RETROACTIVE COVERAGE	\$256,240	\$166,560	\$89,680
12	HURRICANE KATRINA SECTION 1115 WAIVER	\$0	\$505,000	-\$505,000
13	RESOURCE DISREGARD - % PROGRAM CHILDREN	\$0	\$16,581,150	-\$16,581,150
14	REFUGEES	\$0	\$2,371,000	-\$2,371,000
15	NEW QUALIFIED ALIENS	\$0	-\$159,536,500	\$159,536,500
16	ACCELERATED ENROLLMENT-SCHIP TITLE XXI	\$0	\$0	\$0
	<b>ELIGIBILITY SUBTOTAL</b>	<b>\$575,473,380</b>	<b>\$233,542,200</b>	<b>\$341,931,180</b>
<b>BENEFITS</b>				
17	ADULT DAY HEALTH CARE - CDA	\$359,821,000	\$179,910,500	\$179,910,500
18	LOCAL EDUCATION AGENCY (LEA) PROVIDERS	\$153,000,000	\$153,000,000	\$0
19	MULTIPURPOSE SENIOR SERVICES PROGRAM-CDA	\$50,516,000	\$25,258,000	\$25,258,000
20	CONLAN V. BONTA	\$9,814,400	\$4,907,200	\$4,907,200
21	HUMAN PAPILLOMAVIRUS VACCINE	\$3,797,890	\$1,898,950	\$1,898,950
22	PRENATAL SCREENING EXPANSION	\$3,159,650	\$1,579,820	\$1,579,820
23	NF A/B WAIVER GROWTH	\$1,309,260	\$654,630	\$654,630
24	DENTAL RESTORATION DOCUMENTATION REQUIREMENTS	\$1,001,000	\$500,500	\$500,500
25	GENETIC DISEASE TESTING FEE INCREASE	\$940,820	\$470,410	\$470,410
26	FLUORIDE VARNISH	\$920,000	\$460,000	\$460,000
27	ELIMINATION OF PODIATRY TARS	\$119,850	\$59,930	\$59,930
28	NEW SERVICES FOR NF A/B, SUBACUTE & IHMC WAIVER	\$67,090	\$33,540	\$33,540
32	FAMILY PACT STATE ONLY SERVICES	\$0	-\$2,500,000	\$2,500,000
33	CLPP FUNDING FOR EPSDT LEAD SCREENS	\$0	\$0	\$0
34	SCHIP FUNDING FOR PRENATAL CARE	\$0	\$112,063,900	-\$112,063,900
35	CDSS SHARE OF COST PAYMENT FOR IHSS	\$0	-\$5,362,500	\$5,362,500
37	EXPANSION OF NF A/B WAIVER (SB 643)	-\$140,000	-\$70,000	-\$70,000
38	\$1800 DENTAL CAP FOR ADULTS	-\$2,292,000	-\$1,146,000	-\$1,146,000
	<b>BENEFITS SUBTOTAL</b>	<b>\$582,034,960</b>	<b>\$471,718,880</b>	<b>\$110,316,080</b>
<b>PHARMACY</b>				
39	HIV/AIDS PHARMACY PILOT PROGRAM	\$0	-\$4,224,500	\$4,224,500
40	NON FFP DRUGS	\$0	-\$938,000	\$938,000

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<b>PHARMACY</b>				
42	MEDICAL SUPPLY CONTRACTING	-\$3,130,740	-\$1,565,370	-\$1,565,370
43	ENTERAL NUTRITION PRODUCTS	-\$4,426,710	-\$2,213,350	-\$2,213,350
44	NEW THERAPEUTIC CATEGORY REVIEWS/REBATES	-\$4,539,170	-\$2,269,590	-\$2,269,590
45	AGED DRUG REBATE RESOLUTION	-\$12,000,000	-\$6,000,000	-\$6,000,000
46	FAMILY PACT DRUG REBATES	-\$30,207,000	-\$17,992,100	-\$12,214,900
47	STATE SUPPLEMENTAL DRUG REBATES	-\$357,390,000	-\$179,251,000	-\$178,139,000
48	FEDERAL DRUG REBATE PROGRAM	-\$768,626,000	-\$385,509,000	-\$383,117,000
	<b>PHARMACY SUBTOTAL</b>	<b>-\$1,180,319,620</b>	<b>-\$599,962,910</b>	<b>-\$580,356,710</b>
<b>MANAGED CARE</b>				
52	MANAGED CARE INTERGOVERNMENTAL TRANSFERS	\$161,000,000	\$78,500,000	\$82,500,000
55	RESTORATION OF PROVIDER PAYMENT DECREASE	\$66,415,000	\$33,207,500	\$33,207,500
59	RISK PAYMENTS FOR MANAGED CARE PLANS	\$5,000,000	\$2,500,000	\$2,500,000
61	PACE RATES AT 90% OF UPL	\$3,348,000	\$1,674,000	\$1,674,000
62	CAPITATION RATE INCREASES	\$2,860,000	\$1,430,000	\$1,430,000
63	QUALITY IMPROVEMENT ASSESSMENT FEE	\$2,483,000	\$1,241,500	\$1,241,500
64	FFS COSTS FOR MANAGED CARE ENROLLEES	\$0	\$0	\$0
	<b>MANAGED CARE SUBTOTAL</b>	<b>\$241,106,000</b>	<b>\$118,553,000</b>	<b>\$122,553,000</b>
<b>PROVIDER RATES</b>				
65	NF-B RATE CHANGES AND QA FEE	\$139,065,370	\$69,532,680	\$69,532,680
66	LTC RATE ADJUSTMENT	\$51,481,690	\$25,740,850	\$25,740,840
67	ANNUAL MEI INCREASE FOR FQHCS/RHCS	\$15,517,340	\$7,758,670	\$7,758,670
68	NON-CONTRACT HOSP. 10% INTERIM RATE RED.	\$14,883,000	\$7,441,500	\$7,441,500
69	DME REIMBURSEMENT CHANGES	\$4,524,000	\$2,262,000	\$2,262,000
70	HOSPICE RATE INCREASES	\$4,405,590	\$2,202,800	\$2,202,800
71	MINIMUM WAGE INCREASE FOR LTC FACILITIES	\$2,530,690	\$1,265,350	\$1,265,340
	<b>PROVIDER RATES SUBTOTAL</b>	<b>\$232,407,680</b>	<b>\$116,203,840</b>	<b>\$116,203,840</b>
<b>HOSPITAL FINANCING</b>				
74	HOSP FINANCING - DSH PMT	\$1,613,654,000	\$1,030,712,000	\$582,942,000
75	HOSP FINANCING - SAFETY NET CARE POOL	\$593,848,000	\$593,848,000	\$0
76	HOSP FINANCING - PRIVATE DSH REPLACEMENT	\$477,742,000	\$238,871,000	\$238,871,000
77	HOSP FINANCING - PRIVATE HOSPITAL SUPP PMT	\$318,696,000	\$159,348,000	\$159,348,000
78	HOSP FINANCING-DPH PHYSICIAN & NON-PHYSICIAN	\$98,767,000	\$98,767,000	\$0
79	HOSP FINANCING - CCS AND GHPP	\$72,581,000	\$72,581,000	\$0
80	HOSP FINANCING - DISTRESSED HOSPITAL FUND	\$57,696,000	\$28,848,000	\$28,848,000
81	HOSP FINANCING - DPH INTERIM RATE GROWTH	\$5,427,200	\$5,427,200	\$0
82	HOSP FINANCING - NDPH SUPPLEMENTAL PMT	\$3,998,000	\$1,999,000	\$1,999,000
85	HOSP FINANCING - STABILIZATION FUNDING	\$0	\$0	\$0
86	HOSP FINANCING - BCCTP	\$0	\$291,000	-\$291,000
87	BASE ADJUSTMENT - DPH INTERIM RATE	\$0	\$420,586,000	-\$420,586,000

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	<b><u>HOSPITAL FINANCING</u></b>			
88	HOSP FINANCING - MIA LTC	\$0	\$7,328,000	-\$7,328,000
89	HOSP FINANCING - DPH RATE RECONCILIATION	-\$30,528,000	\$0	-\$30,528,000
	<b>HOSPITAL FINANCING SUBTOTAL</b>	<b>\$3,211,881,200</b>	<b>\$2,658,606,200</b>	<b>\$553,275,000</b>
	<b><u>SUPPLEMENTAL PMNTS.</u></b>			
90	CAPITAL PROJECT DEBT REIMBURSEMENT	\$133,691,000	\$66,845,500	\$66,845,500
91	HOSPITAL OUTPATIENT SUPPLEMENTAL PAYMENT	\$120,000,000	\$120,000,000	\$0
92	IGT FOR NON-SB 1100 HOSPITALS	\$100,000,000	\$50,000,000	\$50,000,000
93	FFP FOR LOCAL TRAUMA CENTERS	\$65,000,000	\$32,500,000	\$32,500,000
94	CERTIFICATION PAYMENTS FOR DP-NFS	\$37,000,000	\$37,000,000	\$0
95	DSH OUTPATIENT PAYMENT METHOD CHANGE	\$10,000,000	\$5,000,000	\$5,000,000
96	SRH OUTPATIENT PAYMENT METHOD CHANGE	\$8,000,000	\$4,000,000	\$4,000,000
97	DSH PAYMENTS	\$2,209,000	\$1,104,500	\$1,104,500
	<b>SUPPLEMENTAL PMNTS. SUBTOTAL</b>	<b>\$475,900,000</b>	<b>\$316,450,000</b>	<b>\$159,450,000</b>
	<b><u>OTHER</u></b>			
110	HEALTHY FAMILIES - CDMH	\$40,394,000	\$40,394,000	\$0
111	NURSE-TO-PATIENT RATIOS FOR HOSPITALS	\$14,682,000	\$7,341,000	\$7,341,000
114	MINOR CONSENT SETTLEMENT	\$9,467,000	\$0	\$9,467,000
116	ANTI-FRAUD BIC CLAIMS REPROCESSING	\$3,903,990	\$1,952,000	\$1,952,000
118	TWO-PLAN MODEL NOTICES OF DISPUTE	\$1,000,000	\$0	\$1,000,000
120	ESTATE RECOVERY REGULATIONS	\$427,940	\$213,970	\$213,970
121	FFP REPAYMENT-SPECIALTY MENTAL HEALTH	\$0	-\$1,900,000	\$1,900,000
122	CIGARETTE AND TOBACCO SURTAX FUNDS	\$0	\$0	\$0
124	INDIAN HEALTH SERVICES	\$0	\$5,900,000	-\$5,900,000
125	ANTI-FRAUD EXPANSION FOR FY 2004-05	\$0	\$0	\$0
126	NON-INSTITUTIONAL PROVIDER OVERPAYMENTS	\$0	-\$36,000,000	\$36,000,000
127	STATE-ONLY IMD ANCILLARY SERVICES	\$0	-\$11,900,000	\$11,900,000
129	MEDICAL SUPPORT ENHANCEMENTS	-\$1,006,460	-\$503,230	-\$503,230
130	GLAXOSMITHKLINE SETTLEMENT	-\$1,239,000	\$0	-\$1,239,000
131	EDS COST CONTAINMENT PROJECTS	-\$1,627,440	-\$813,720	-\$813,720
132	NEW RECOVERY ACTIVITIES	-\$16,857,660	-\$8,428,830	-\$8,428,830
133	ANTI-FRAUD EXPANSION FOR FY 2005-06	-\$30,145,970	-\$15,072,980	-\$15,072,980
134	ANTI-FRAUD EXPANSION FOR FY 2006-07	-\$37,617,150	-\$18,808,580	-\$18,808,570
	<b>OTHER SUBTOTAL</b>	<b>-\$18,618,760</b>	<b>-\$37,626,380</b>	<b>\$19,007,630</b>
	<b>GRAND TOTAL</b>	<b>\$4,119,864,840</b>	<b>\$3,277,484,830</b>	<b>\$842,380,010</b>